


SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

**SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN**

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Anthony Pierce</u>		2. COURT NUMBER <u>CV-2022-004142</u>
3. DEFENDANT/S/ <u>Delaware County at bk George W. Hill Correctional Facility et al</u>		4. TYPE OF WRIT OR COMPLAINT <u>Complaint</u>
SERVE  AT		
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>G. Blee</u>		
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>600 Cherry Rd Thornton PA 19373</u>		
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER		
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.		

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477636
 Amount Pd \$327.00
 Docket #
 Page

9 of 10

10 copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffert, Esq
11 Bala Ave
Bala Cynwyd PA 19034

10. TELEPHONE NUMBER610-664-5200**11. DATE**7/6/22**12. SIGNATURE**(S) Gary Schaffert**SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE**

13. I acknowledge receipt of the writ or complaint as indicated above } SIGNATURE of Authorized DCSD Deputy or Clerk and Title MMH 14. Date Filed RE/6-24-22 15. Expiration/Hearing date 30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura K. Williams, Defendant(s)
 on the 19th day of July, 20 22, at 200 o'clock, P M.,
 at 500 Cherry Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business. Warden
☐ Posted
☐ Other _____

On the _____ day of _____, 20____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:**RETURNED:**

17. AFFIRMED and subscribed to before me this _____	SO ANSWER.	
20. day of _____ 20____	18. Signature of Dep. Sheriff <u>Kerim Sanlan</u>	19. Date <u>7/19/22</u>
23. _____ Notary Public	20. Signature of Sheriff	22. Date
SHERIFF OF DELAWARE COUNTY		

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received JUL 20 2022

DCSD-1-1989

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Anthony Pierre

2. COURT NUMBER

CV-2022-004140

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

4. TYPE OF WRIT OR COMPLAINT

Complaint

SERVE

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

K. Moore

AT

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477636
Amount Pd \$327.00
Docket #
Page

10 of 10

10 Copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffkopf, Esq

11 Bala An

Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7/6/22

12. SIGNATURE

121 Gary Schaffkopf

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

CMMH RE/6-24-22

15. Expiration/Hearing date

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

Laura K. Williams

on the 19th day of JULY

20

22

at 500 Cheney Rd, Thornton PA 19373, at 200 o'clock, P M., Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business. Warden

☐ Posted☐ Other

On the day of 20, at o'clock, M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this

20 day of 20

SO ANSWER

18. Signature of Dep Sheriff

21. Signature of Sheriff

19. Date

22. Date

Notary Public

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

Jerry C. Sanders Jr.

25. Date Received

Jul 20 2022

DCSD-1-1989

FILED

07-27-2022 02:03 PM

OFFICE OF JUDICIAL SUPPORT
DELAWARE COUNTY, PA

1. ISSUING AUTHORITY

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Anthony Pieni</u>		2. COURT NUMBER <u>CV-2022-004143</u>
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et</u>		4. TYPE OF WRIT OR COMPLAINT <u>Complaint</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Mike Moore</u>		
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Chynney Rd Thornton PA 19373</u>		
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER		
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of <u>Delaware</u> County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.		

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477636
 Amount Pd. \$327.00
 Docket #
 Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schafkopf Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>	10. TELEPHONE NUMBER <u>610-664-5200</u>	11. DATE <u>7/6/22</u>
12. SIGNATURE <u>151 Gary Schafkopf</u>		

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>MMH</u>	14. Date Filed <u>RE/6-24-22</u>	15. Expiration/Hearing date <u>30 Days</u>
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TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura K. Williams, Defendant(s)
 on the 19th day of July, 20 22, at 200 o'clock, P M.,
 at 500 Chynney Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business. Warden
☐ Posted
☐ Other

On the _____ day of _____, 20____, at _____ o'clock, _____ M.
 Defendant not found because:
☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____ 20 day of _____ 20____ 23 _____ Notary Public	SO ANSWER. 18. Signature of Dep. Sheriff <u>Kevin Scanlon</u> 21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u> SHERIFF OF DELAWARE COUNTY	19. Date <u>7/19/22</u> 22. Date
MY COMMISSION EXPIRES		25. Date Received <u>JUL 20 2022</u>
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE		

DCSD-1-1999

1. ISSUING AUTHORITY

FILED
 07-27-2022 02:01 PM
 OFFICE OF JUDICIAL SUPPORT
 DELAWARE COUNTY, PA

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Anthony Pieni</u>	2. COURT NUMBER <u>CV-2022-004146</u>
3. DEFENDANT/S/ <u>Delaware County d/b/k George W. Hill Correctional Facility et al</u>	4. TYPE OF WRIT OR COMPLAINT <u>Complaint</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Sergeant Hambre</u>	
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cherry Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER	

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of Delaware County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477636Amount Pd. \$327.00

Docket #

Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

10. TELEPHONE NUMBER

11. DATE

610-664-52007/6/22

12. SIGNATURE

BI Gary SchalkopfGary Schalkopf, Esq.11 Bala AveBala Cynwyd PA 19373

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above } SIGNATURE of Authorized DCSD Deputy or Clerk and Title ATTN REF/6-24-22 14. Date Filed 7/6/22 15. Expiration/Hearing date 30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura K. Williams, Defendant(s)
on the 19th day of July, 20 22, at 200 o'clock, P M.,
at 500 Cherry Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business. Warden

☐ Posted☐ Other

On the _____ day of _____, 20 _____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____

SO ANSWER.

20. day of _____ 20 _____

18. Signature of
Dep. Sheriff

21. Signature of Sheriff

19. Date

22. Date

23. _____
Notary Public

MY COMMISSION EXPIRES

SHERIFF OF DELAWARE COUNTY

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

Jul 20 2022

DCSD-1-1989

FILED

07-27-2022 01:58 PM

OFFICE OF JUDICIAL SUPPORT
DELAWARE COUNTY, PA

1. ISSUING AUTHORITY

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Anthony Pierri

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility et al

2. COURT NUMBER

CW 2022-004140

4. TYPE OF WRIT OR COMPLAINT

Complaint

SERVE

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Sergeant Richbert

AT

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheyney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477636

Amount Pd. \$327

Docket #

Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schalkert, Esq.

11 Bala Ave

Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7/6/22

12. SIGNATURE

[Signature] Gary Schalkert

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

RE/6-24-22

15. Expiration/Hearing date

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura K Williams on the 19th day of July, 2022, at 200 o'clock, P.M., at 500 Cheyney Rd, Thornton PA 19373 Defendant(s) Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business. Warden
- ☐ Posted _____
- ☐ Other _____

On the _____ day of _____, 20____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____

20 day of _____ 20____

23. _____ Notary Public

SO ANSWER

18. Signature of Dep/Sheriff

21. Signature of Sheriff

19. Date 7/19/22

22. Date

MY COMMISSION EXPIRES

SHERIFF OF DELAWARE COUNTY

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

[Signature] Jerry L. Sanders Jr.

25. Date Received 7-20-2022

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Anthony Pierri</u>		2. COURT NUMBER <u>CV-2022-004140</u>
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility</u>		4. TYPE OF WRIT OR COMPLAINT <u>Complaint</u>
SERVE AT	5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Sergeant Sicotte</u>	
	6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheney Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER		
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of <u>Delaware</u> County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.		
SHERIFF OF DELAWARE COUNTY		

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff
Invoice No. 477636
Amount Paid \$327.00
Docket #
Page

6 to 10

10 Copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffert, Esq.
11 Bala Ave
Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-6-22

12. SIGNATURE

At Gary Schaffert

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>CMKH</u>	14. Date Filed <u>RE/6-24-22</u>	15. Expiration/Hearing date <u>30 Days</u>
TO BE COMPLETED BY SHERIFF			
16. Served and made known to <u>Laura K. Williams</u> , Defendant(s) on the <u>19th</u> day of <u>July</u> , 20 <u>22</u> , at <u>200</u> o'clock, <u>P</u> M., at <u>500 Cheney Rd, Thornton PA 19373</u> Street, County of Delaware.			
Commonwealth of Pennsylvania, in the manner described below: <input type="checkbox"/> Defendant(s) personally served. <input type="checkbox"/> Adult family member with whom said Defendant(s) reside(s). Relationship is <input type="checkbox"/> Adult in charge of Defendant's residence. <input type="checkbox"/> Manager/Clerk of place of lodging in which Defendant(s) reside(s). <input checked="" type="checkbox"/> Agent or person in charge of Defendant's office or usual place of business. <u>Warden</u> <input type="checkbox"/> Posted <input type="checkbox"/> Other			
On the _____ day of _____, 20____, at _____ o'clock, _____ M.			
Defendant not found because: <input type="checkbox"/> Moved <input type="checkbox"/> Unknown <input type="checkbox"/> No Answer <input type="checkbox"/> Vacant <input type="checkbox"/> Other			
REMARKS:			
RETURNED:			
17. AFFIRMED and subscribed to before me this _____ 20 day of _____, 20____	18. Signature of Dep Sheriff <u>John R. Kevin Scanlon</u>		19. Date <u>7/19/22</u>
23. _____ Notary Public	21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u>		22. Date <u>7/19/22</u>
MY COMMISSION EXPIRES _____			
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE			25. Date Received <u>7-20-2022</u>

DCSD-1-1999

1. ISSUING AUTHORITY

FILED
07-27-2022 01:57 PM
OFFICE OF JUDICIAL SUPPORT
DELAWARE COUNTY, PA